

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	bl		8-7-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	R32	JC3-883	07-07-01
RESPONSE FORMALITY REVIEW	H.L.	1079	02/26/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	12/12/02
2	5/26/03
3	11/17/03
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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926 101  
 09/10/01  
 619 26-02